Fill in this information to identify your case:				
Debtor 1	GLENDA M	IORGAN		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	Bankruptcy Court fo	or the: Southern District of	Mississippi	
Case number	(If known)			

Check if this is	an
amended filing	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ 0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>7,</u> 710.00
1c. Copy line 63, Total of all property on Schedule A/B	\$7,710.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$38,212.00
. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 16,413.00
Your total liabilities	\$54,625.00
Part 3: Summarize Your Income and Expenses	
. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,002.13
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$ <u>1,998.00</u>

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GLENDA MORGAN
Debtor 1

Middle Name

Case number (if known)	
------------------------	--

First Name

Answer These Questions for Administrative and Statistical Records

Last Name

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?			
	 □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ☑ Yes 			
7.	What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.		onal,	
	☐ Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	of the form. Check this box ar	nd submit	
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official	\$1,151.00	
9.	Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :			
		Total claim		
	From Part 4 on Schedule E/F, copy the following:			
	9a. Domestic support obligations (Copy line 6a.)	\$		
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$		
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$		
	9d. Student loans. (Copy line 6f.)	\$		
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$		
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$		
	9g. Total. Add lines 9a through 9f.	\$		
			•	

19-00553-NPO Dkt 5 Filed 02/13/19 Entered 02/13/19 13:55:41 Page 3 of 62 Fill in this information to identify your case and this filing: GLENDA MORGAN Debtor 1 Middle Nam Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Southern District of Mississippi Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ✓ Single-family home the amount of any secured claims on Schedule D: 5943 WAVERLY DRIVE Creditors Who Have Claims Secured by Property: Duplex or multi-unit building Street address, if available, or other description Current value of the Current value of the Condominium or cooperative portion you own? entire property? Manufactured or mobile home s Unknown \$ Unknown ☐ Land Investment property Jackson MS 39206 Describe the nature of your ownership Timeshare interest (such as fee simple, tenancy by Citv State ZIP Code the entireties, or a life estate), if known. Fee simple Who has an interest in the property? Check one. Check if this is community property Debtor 1 only **Hinds County** Debtor 2 only County Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? Land Investment property Timeshare Describe the nature of your ownership City State **7IP Code** interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only □ Check if this is community property

At least one of the debtors and another

property identification number:

Other information you wish to add about this item, such as local

(see instructions)

1	Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? Describe the nature of interest (such as fee the entireties, or a life.)	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ If your ownership simple, tenancy by
	County	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this ite property identification number:	(see instructions)	mmunity property
		II of your entries from Part 1, including any entries		\$ 0.00
you	mave attached for Fart 1. Write that humber i			
Part 2:	Describe Your Vehicles			
you owr	that someone else drives. If you lease a vehicles, vans, trucks, tractors, sport utility vehicles	st in any vehicles, whether they are registered or rele, also report it on Schedule G: Executory Contracts as, motorcycles		3
3.1.	Make:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on <i>Schedule D:</i>
	Year: Approximate mileage: Other information:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
lf vo	u own or have more than one, describe here:	☐Check if this is community property (see instructions)	\$	\$
3.2.		Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule D:</i>
	Year:Approximate mileage:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ Check if this is community property (see instructions)	\$	\$
1				

	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
	Model:	Debtor 1 only	Creditors Who Have Clair	
	Year:	Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		Check if this is community property (see	\$	\$
		instructions)		
	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clain	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	Other information.	Check if this is community property (see	\$	\$
		instructions)		
4. Wate	ercraft, aircraft, motor homes, ATVs and	other recreational vehicles, other vehicles, and acces	sories	
Exan	nples: Boats, trailers, motors, personal water	ercraft, fishing vessels, snowmobiles, motorcycle accesso	ries	
V N	lo			
Y	'es			
4.1.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clain	
	Year:	Debtor 2 only		
	Other information:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information.	At least one of the debtors and another	entire property?	portion you own?
		Check if this is community property (see		
		instructions)	\$	\$
If you	own or have more than one, list here:			
4.2.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clain	
	Year:	Debtor 2 only	Current value of the	Current value of the
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see	\$	\$
		instructions)		
5 Add	the dollar value of the portion you own f	or all of your entries from Part 2, including any entries	s for pages	¢ 0.00
		per here		\$ 0.00
•				

Part 3: Describe Your Personal and Household Items

Do	you own or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own?
6.	Household goods and	furnishings	Do not deduct secured claims or exemptions.
		ces, furniture, linens, china, kitchenware furniture and household goods	
	✓ Yes. Describe		
			\$_3,500.00
7.	Electronics		
		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, games	_
	□ No	TELEVISION	400.00
	✓Yes. Describe		\$
8.	Collectibles of value		
	stamp, coin,	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	-
	✓ No ✓ Yes. Describe		\$ 0.00
			\$
9.	Equipment for sports a		
	and kayaks;	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments	1
	✓ No✓ Yes. Describe		s 0.00
			\$
10.	Firearms		
	Examples: Pistols, rifles, No	shotguns, ammunition, and related equipment	
	Yes. Describe		\$ <u>0.00</u>
11.	Clothes		
	Examples: Everyday clo	thes, furs, leather coats, designer wear, shoes, accessories	
	□ No □ Yes. Describe	CLOTHING	\$500.00
	Yes. Describe		\$
12.	Jewelry		
	•	relry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	☑ No ☐ Yes. Describe		\$ 0.00
13.	Non-farm animals		1
	Examples: Dogs, cats, b	irds, horses	
	✓ No ✓ Yes. Describe		\$0.00
	Tes. Describe		\$
14.	Any other personal and	household items you did not already list, including any health aids you did not list	1
	No Sive apositio		0.00
	Yes. Give specific information		\$
15.		all of your entries from Part 3, including any entries for pages you have attached	\$ 4,400.00
	i dit oi mille tilat lit		

Part 4:	Describe	Your	Financial	Assets
I uit T.	Describe	· oui	· manoiai	700010

Do you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes Cash:	\$ <u>100.00</u>
 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No	
17.1. Checking account: regions	_{\$} 10.00
17.2. Checking account: Reanasant	100.00
17.3. Savings account: trustmark	
17.4. Savings account:	
17.5. Certificates of deposit:	
17.6. Other financial account:	
17.7. Other financial account:	
17.8. Other financial account:	
17.9. Other financial account:	
18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No □ Yes Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No	\$ \$ \$
Yes. Give specific information about	
them	
	\$
	•
	Φ

20. Government and corporate bonds and other negotiable and non-negotiable instruments	
Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.	
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.	
✓ No	
☐Yes. Give specific information about	
them	
Issuer name:	•
	\$
·	
·	_ \$
21. Retirement or pension accounts	
Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No	
☐ Yes. List each account separately. Institution name:	
Type of account:	
401(k) or similar plan:	\$
IRA:	- \$
Retirement account:	\$
Keogh:	\$
Additional account:	\$
Additional account:	
	- \$
22. Security deposits and prepayments	
Your share of all unused deposits you have made so that you may continue service or use from a company	
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
companies, or others	
☑ No	
Yes Institution name or individual:	•
Electric:	\$
Gas:	\$
Heating oil:	\$
Rental unit:	\$
Prepaid rent:	\$
Telephone:	\$
Water:	\$
Rented furniture:	\$
Other:	\$
23. Appuition (A contract for a periodic payment of manay to your either for life or for a number of years)	
23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)	
☑ No	
Yes Issuer name and description:	_
	\$
	\$
	\$

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(INo			
☐ Yes Institution r	name and description. Separately file the records of any inter-	ests.11 U.S.C. § 521(c) :
			\$
			- \$
			- \$
exercisable for your benefit	roperty (other than anything listed in line 1), and rights o	or powers	1
✓ No ✓ Yes. Give specific information about them			\$0.00
<u> </u>	secrets, and other intellectual property es, proceeds from royalties and licensing agreements		7
✓ No Yes. Give specific information about them			\$0.00
	intangibles nses, cooperative association holdings, liquor licenses, profes	ssional licenses	1
✓ No ✓ Yes. Give specific information about them			\$0.00
Money or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you			
□ No			
Yes. Give specific information	2018 tax refund fe and state	Federal:	3,000.00
about them, including whether you already filed the returns		State:	§ 0.00
and the tax years		Local:	§ 0.00
 29. Family support Examples: Past due or lump sum alimony, ☑ No ☐ Yes. Give specific information	spousal support, child support, maintenance, divorce settlem	nent, property settleme	nt
Tes. Give specific information		Alimony:	\$0.00
		Maintenance:	\$ 0.00
		Support:	\$ 0.00
		Divorce settlement:	\$ <u>0.00</u> \$ 0.00
		Property settlement:	ъ <u>о.оо</u>
Social Security benefits; unpaid	nce payments, disability benefits, sick pay, vacation pay, wo	rkers' compensation,	7
☑ No			
Yes. Give specific information			\$ 0.00

31. Interests in insurance policies Examples: Health, disability, or life insurance. V No	ce; health savings account (HSA); credit, ho	meowner's, or renter's insurance	
Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
of each policy and list its value			\$
			\$
			\$
32. Any interest in property that is due you if you are the beneficiary of a living trust, exproperty because someone has died. ☑ No ☐ Yes. Give specific information		or are currently entitled to receive	_{\$} 0.00
33. Claims against third parties, whether or Examples: Accidents, employment disputes V No		emand for payment	
Yes. Describe each claim			\$ <u>0.00</u>
34. Other contingent and unliquidated claim to set off claims V No	s of every nature, including counterclain	ns of the debtor and rights	_'
Yes. Describe each claim			\$0.00
35. Any financial assets you did not already	list		_l
✓ No ☐ Yes. Give specific information			\$ <u>0.00</u>
36. Add the dollar value of all of your entries for Part 4. Write that number here	, ,	_	\$3,310.00
Part 5: Describe Any Business-F	Related Property You Own or Ha	ve an Interest In. List any re	eal estate in Part 1.
37. Do you own or have any legal or equitab No. Go to Part 6. Yes. Go to line 38.	le interest in any business-related prope	rty?	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions you No	u already earned		
Yes. Describe			\$
39. Office equipment, furnishings, and supp Examples: Business-related computers, software	blies , modems, printers, copiers, fax machines, rugs, to	elephones, desks, chairs, electronic devices	
Yes. Describe			\$

40. Machinery, fixtures, equipm	nent, supplies you use in business, and tools of your trade					
☐ No ☐ Yes. Describe			\$			
41. Inventory No Yes. Describe						
42. Interests in partnerships or	joint ventures					
Yes. Describe Name	e of entity:	% of ownership:	\$			
		% %	\$ \$			
43. Customer lists, mailing lists	s, or other compilations					
	de personally identifiable information (as defined in 11 U.S.C. § 101(41A	\)) ?				
Yes. Describe			\$			
44. Any business-related prope	erty you did not already list					
Yes. Give specific information			\$			
			\$ \$			
			\$			
			\$			
	of your entries from Part 5, including any entries for pages you have at er here	tached	<u>\$</u> 0.00			
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.						
46. Do you own or have any leg ✓ No. Go to Part 7. ✓ Yes. Go to line 47.	gal or equitable interest in any farm- or commercial fishing-related pro	perty?				
			Current value of the portion you own? Do not deduct secured claims or exemptions.			
47. Farm animals <i>Examples</i> : Livestock, poultry,	, farm-raised fish					
☐ No ☐ Yes]			
			\$			

48. Crops—either growing or harvested			
No Yes. Give specific information			\$
49. Farm and fishing equipment, implements, machinery, fixtures	s, and tools of trade		_
☐ Yes			
50. Farm and fishing supplies, chemicals, and feed			\$
□ No			
Yes			\$ \$
51. Any farm- and commercial fishing-related property you did no	ot already list		
Yes. Give specific information] _
		have ellerhad	\$
52. Add the dollar value of all of your entries from Part 6, including for Part 6. Write that number here		_	\$_0.00
Part 7: Describe All Property You Own or Have a	in Interest in That	You Did Not List Above	
53. Do you have other property of any kind you did not already lie Examples: Season tickets, country club membership	st?		
✓ No			
Yes. Give specific information			
54. Add the dollar value of all of your entries from Part 7. Write th	at number here	······································	\$0.00
,			
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2		→	\$ <u>0.00</u>
56. Part 2: Total vehicles, line 5	<u>\$</u> 0.00	-	
57. Part 3: Total personal and household items, line 15	\$_4,400.00	_	
58. Part 4: Total financial assets, line 36	_{\$} 3,310.00	-	
59. Part 5: Total business-related property, line 45	\$ <u>0.00</u>	-	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	-	
61. Part 7: Total other property not listed, line 54	+ \$_0.00	-	
62. Total personal property. Add lines 56 through 61	\$_7,710.00	Copy personal property total	≠ \$ <u>7,710.00</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$_7,710.00

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim	as Exempt					
 Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 						
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below. 						
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
	Copy the value from Schedule A/B	Check only one box for each exemption				
Household goods - furniture and household Brief description: Line from Schedule A/B: 6	goods \$_3,500.00	\$\frac{3,500.00}{100% of fair market value, up to any applicable statutory limit	MS Code § 85-3-1 (a)			
Brief Electronics - TELEVISION description: Line from Schedule A/B: 7	<u>\$ 400.00</u>	\$ 400.00 100% of fair market value, up to any applicable statutory limit	MS Code § 85-3-1 (a)			
Brief Clothing - CLOTHING description: Line from Schedule A/B: 11	\$ 500.00	500.00 100% of fair market value, up to any applicable statutory limit	MS Code § 85-3-1 (a)			
3. Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 Mo Yes. Did you acquire the property covered by Yes.	years after that for cases filed	,				

Debtor

GLENDA MORGAN First Name Middle Name Last Name

Case number (if known	vn)	
-----------------------	-----	--

Part 2:

Additional Page

	<u>. </u>	-	-	
	Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
	cription:	<u>\$100.00</u>	\$ 100.00 100% of fair market value, up to	MS Code § 85-3-1 (a)
	e from edule A/B: 16		any applicable statutory limit	
	f 2018 tax refund fe and state (owed to debtor) cription:	\$3,000.00	\$\frac{3,000.00}{100\% of fair market value, up to any applicable statutory limit	MS Code § 85-3-1 (j)
	edule A/B: 28			
Brie des	f cription:	\$	\$ 100% of fair market value, up to	0
	e from edule A/B:		any applicable statutory limit	
Brie des	f cription:	\$	\$	
	e from edule A/B:		100% of fair market value, up to any applicable statutory limit)
Brie des	f cription:	\$	\$ 100% of fair market value, up to	
	e from edule A/B:		any applicable statutory limit	,
Brie des	f cription:	\$	\$	
	e from edule A/B:		100% of fair market value, up to any applicable statutory limit	
Brie des	f cription:	\$	\$	
	e from edule A/B:		100% of fair market value, up to any applicable statutory limit)
	cription:	\$	\$ 100% of fair market value, up to any applicable statutory limit)
	efrom edule A/B:		any approasie diatatery mini	
Brie des	f cription:	\$	\$ \$ 100% of fair market value, up to	
	e from edule A/B:		any applicable statutory limit	
Brie des	f cription:	\$	\$\$ \$ 100% of fair market value, up to	
	e from edule A/B:		any applicable statutory limit	,
Brie des	f cription:	\$	\$100% of fair market value, up to any applicable statutory limit	1
	e from edule A/B:		ану аррисаме зіашогу ііПІІІ	
Brie des	f cription:	\$	\$100% of fair market value, up to	
	e from edule A/B:		any applicable statutory limit	

Fill in this information to identify your cas	e:			
GLENDA MORGAN				
Debtor 1 First Name Middle N	ame Last Name			
Debtor 2 (Spouse, if filing) First Name Middle N	ame Last Name			
United States Bankruptcy Court for the: Southern D	District of Mississippi			
Case number (If known)				f this is an
			amende	ed filing
Official Form 106D				
	s Who Have Claims Secur	ed by Prop	perty	12/15
Be as complete and accurate as possible.	If two married people are filing together, both are e	qually responsible f	or supplying correct	:
information. If more space is needed, copy	the Additional Page, fill it out, number the entries,			
additional pages, write your name and cas	e number (if known).			
1. Do any creditors have claims secured b	y your property?			
☐ No. Check this box and submit this form	n to the court with your other schedules. You have noth	ing else to report on	this form.	
Yes. Fill in all of the information below.				
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has m	nore than one secured claim, list the creditor separately	Column A Amount of claim	Column B Value of collateral	Column C Unsecured
for each claim. If more than one creditor ha	as a particular claim, list the other creditors in Part 2.	Do not deduct the	that supports this	portion
•	abetical order according to the creditor's name.	value of collateral.	claim	If any
2.1 MR COOPER	Describe the property that secures the claim:	\$ 38,212.00	\$ 0.00	\$ 38,212.00
	5943 WAVERLY DRIVE, Jackson, MS 39206 - \$0.00		· · · · · · · · · · · · · · · · · · ·	
Creditor's Name	working on modification			
8950 CYPRESS WATERS BLVD Number Street				
	As of the date you file, the claim is: Check all that apply			
Coppell TX 75019	Contingent			
City State ZIP Code Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed			
Debtor 1 only	·			
Debtor 2 only	Nature of lien. Check all that apply.			
Debtor 1 and Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)			
☐ Check if this claim relates to a	Judgment lien from a lawsuit			
community debt Date debt was incurred	Other (including a right to offset) Last 4 digits of account number	_		
2.2		Φ.	\$	
	Describe the property that secures the claim:	\$	- Φ	Φ
Creditor's Name				
Number Street				
Namber Check				
	As of the date you file, the claim is: Check all that apply			
200	Contingent			
City State ZIP Code Who owes the debt? Check one.	Unliquidated			
Debtor 1 only	☐ Disputed			
Debtor 2 only	Nature of lien. Check all that apply.			
Debtor 1 and Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)			
☐ Check if this claim relates to a	Judgment lien from a lawsuit			
community debt	Other (including a right to offset)	_		
Date debt was incurred	Last 4 digits of account number	\$ 38.212.00		

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GLENDA MORGAN Debtor 1 Case number (if known) First Name Middle Name Last Name List Others to Be Notified for a Debt That You Already Listed Part 2: Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? _ Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? _ Last 4 digits of account number Name Street City ZIP Code On which line in Part 1 did you enter the creditor? ___ Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? ____ Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? _____ Last 4 digits of account number Name Street

City

ZIP Code

Fil	I in this information to identify your case:					
Do	GLENDA MORGAN					
De	First Name Middle Name	Last Name				
	ouse, if filing) First Name Middle Name	Last Name				
Un	ited States Bankruptcy Court for the: Southern District of	Mississippi				
	se number				_	k if this is an
	known)				amen	ded filing
Of	ficial Form 106E/F					
Sc	hedule E/F: Creditors W	/ho Have Unsecu	red Claim	S		12/15
Be a	s complete and accurate as possible. Use Part	1 for creditors with PRIORITY clai	ms and Part 2 for o	creditors with	NONPRIORIT	Y claims.
List	the other party to any executory contracts or use Property (Official Form 106A/B) and on Sched	inexpired leases that could result i	n a claim. Also lis	t executory co	ntracts on Sc	hedule
crec	litors with partially secured claims that are liste	ed in Schedule D: Creditors Who H	ave Claims Secure	ed by Property	. If more spac	e is
	ded, copy the Part you need, fill it out, number additional pages, write your name and case nu		Attach the Contin	uation Page to	this page. O	n the top of
Par	t 1: List All of Your PRIORITY Unsecur	ad Claims				
	Do any creditors have priority unsecured claim ☑ No. Go to Part 2.	s against you?				
	Yes.					
	List all of your priority unsecured claims. If a co					
1	each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the	claims in alphabetical order according	to the creditor's na	me. If you have	e more than two	o priority
	unsecured claims, fill out the Continuation Page of For an explanation of each type of claim, see the		•	list the other c	reditors in Part	3.
	For all explanation of each type of claim, see the		don bookiet.)	Total claim	Priority	Nonpriority
					amount	amount
2.1		Last 4 digits of account number	;	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?				
	Number Street	_				
		As of the date you file, the claim is	Check all that apply.			
	City State ZIP Code	☐ Contingent☐ Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of PRIORITY unsecured cl	aim:			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Domestic support obligations ☐ Taxes and certain other debts you	owe the government			
	At least one of the debtors and another	Claims for death or personal injury	-			
	☐ Check if this claim is for a community debt	intoxicated	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Is the claim subject to offset?	☐ Other. Specify				
	□ No □ Yes					
2.2		Last 4 digits of account number		\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?		-		-
	Number Street	As of the date you file, the claim is	: Check all that apply			
		Contingent	oriook all that appry.			
	0.1	Unliquidated				
	City State ZIP Code Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of PRIORITY unsecured cl	aim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations				
	At least one of the debtors and another	☐ Taxes and certain other debts you☐ Claims for death or personal injury				
	☐ Check if this claim is for a community debt	intoxicated	write you were			
	Is the claim subject to offset?	Other. Specify				
	☐ No					
	Yes					

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GLENDA MORGAN Debtor 1

Case number (if known)_

	First Name Middle Name Last Name	:		
Pa	rt 2: List All of Your NONPRIORITY Uns	secured Claims		
3.	Do any creditors have nonpriority unsecured of No. You have nothing to report in this part. Surely Yes			
4.	nonpriority unsecured claim, list the creditor separ	ately for each claim	rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no	list claims already
	AAM			Total claim
.1			Last 4 digits of account number	s Unknown
	Nonpriority Creditor's Name		When was the debt incurred?	\$ <u></u>
	330 GEORGETOWN SQ Number Street			
	Number Street			
	Wood Dale IL	60191	As of the date you file, the claim is: Check all that apply.	
	Wood Dale IL City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only		Student loans	
	☐ At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify	
	✓ No			
.2	AD ASHTRA RECOVERY		Last A divite of account number	_{\$} Unknown
	J		Last 4 digits of account number When was the debt incurred?	\$ <u>0111(110</u>
	Nonpriority Creditor's Name 8918 W 21ST ST N			
	Number Street		As of the date you file, the claim is: Check all that apply.	
			<u> </u>	
	Wichita KS	67205	☐ Contingent ☐ Unliquidated	
	City State Who incurred the debt? Check one.	ZIP Code	☐ Disputed	
	☑ Debtor 1 only ☐ Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	☐ At least one of the debtors and another		that you did not report as priority claims	
	igsqcup Check if this claim is for a community debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	Is the claim subject to offset?		Other. Specify	
	✓ No			
.3	AIS PORTFOLIO SERVICES LP			
	J		Last 4 digits of account number When was the debt incurred?	\$ <u>0.00</u>
	Nonpriority Creditor's Name 5415 N SANTA FE AVENUE DEPT APS		when was the debt incurred?	
	Number Street			
			As of the date you file, the claim is: Check all that apply.	
	Oklahoma City OK City State	73118 ZIP Code	Contingent	
	Who incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	☑ Debtor 1 only ☐ Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify	

✓ No Yes 19-00553-NPO Dkt 5 Filed 02/13/19 Entered 02/13/19 13:55:41 Page 19 of 62

Debtor 1 GLENDA MORGAN

First Name Middle Name

Last Name

Pa	rt 2: List All of Your NONPRIC	RITY Un	secured Claims	•	
3.	Do any creditors have nonpriority u	nsecured	claims against yo	u?	
	☐ No. You have nothing to report in t ✓ Yes	his part. S	ubmit this form to th	ne court with your other schedules.	
	nonpriority unsecured claim, list the cre	editor sepa editor holds	arately for each clain	order of the creditor who holds each claim. If a creditor has m. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no	: list claims already
					Total claim
4.4	AMERICAN INFOSOURCE LP			Last 4 digits of account number	
	Nonpriority Creditor's Name			-	\$ Unknown
	AGENT FOR SPOT LOAN			When was the debt incurred?	
	Number Street P.O. BOX 248838				
	Oldohama City	OK	70104	As of the date you file, the claim is: Check all that apply.	
	Oklahoma City City	OK State	73124 ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only			☐ Obligations arising out of a separation agreement or divorce	
	☐ At least one of the debtors and anothe	r		that you did not report as priority claims	
	☐ Check if this claim is for a comm	unity debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	Is the claim subject to offset?			Other. Specify	
	✓ No				
4.5	Yes ARCHER DIRECT SERVICES				_{\$} Unknown
4.5] /			Last 4 digits of account number When was the debt incurred?	\$ OTIKHOWIT
	Nonpriority Creditor's Name 114 2ND RIVO ALTO TERRACE			- When was the dept incurred:	
	Number Street			-	
				As of the date you file, the claim is: Check all that apply.	
	Miami Beach	FL	33139	Contingent	
	City Who incurred the debt? Check one.	State	ZIP Code	□ Unliquidated □ Disputed	
	Debtor 1 only			Type of NONPRIORITY unsecured claim:	
	Debtor 2 only			Student loans	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anothe	-		Obligations arising out of a separation agreement or divorce	
	_			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a commi	unity debt		U Other. Specify	
	Is the claim subject to offset?				
	✓ No				
4.6	ATT UVERSE			Last 4 digits of account number	
				When was the debt incurred?	_{\$} Unknown
	Nonpriority Creditor's Name C/O IC SUSTEMS INC.			When was the dest incurred:	
	Number Street			-	
	P.O. BOX 64378			As of the date you file, the claim is: Check all that apply.	
	Saint Paul City	MN	55164 ZIP Code	Contingent	
	Who incurred the debt? Check one.	Olalo	2 0000	☐ Unliquidated ☐ Disputed	
	Debtor 1 only			Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and anothe	r		☐ Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a comm	unity debt		that you did not report as priority claims	
		armey acol		☐ Debts to pension or profit-sharing plans, and other similar debts✓ Other. Specify	
	Is the claim subject to offset?			Suita. Opening	
	Yes				

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GLENDA MORGAN

Debt	or 1				Case number (if known)	
		First Name Middle Name	Last Name			
Paı	rt 2: L	ist All of Your NONPRIOF	RITY Uns	secured Claims		
2	Do any o	creditors have nonpriority uns	socured c	laime against you?		
J.	_				court with your other schedules.	
	☑ Yes	rod have nothing to report in thi	s part. Ou	billit tills form to the	court with your other schedules.	
					rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not	
					st the other creditors in Part 3.If you have more than three no	
		I out the Continuation Page of F		, , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,
						Total claim
7	BANK	OF AMERICA				Total Claim
.,		ty Creditor's Name			Last 4 digits of account number	_{\$} Unknown
	•	RUPTCY DEPT			When was the debt incurred?	Ψ
	Number	Street				
	P.O. B	OX 650070				
					As of the date you file, the claim is: Check all that apply.	
	Dallas		TX	75265 ZIP Code	Contingent	
	City		State	ZIP Code	☐ Unliquidated	
	_	curred the debt? Check one.			Disputed	
		tor 1 only			Type of NONPRIORITY unsecured claim:	
		tor 2 only			☐ Student loans	
	_	tor 1 and Debtor 2 only east one of the debtors and another			Obligations arising out of a separation agreement or divorce	
		ast one of the deptors and another			that you did not report as priority claims	
	☐ Che	eck if this claim is for a commur	nity debt		□ Debts to pension or profit-sharing plans, and other similar debts☑ Other. Specify	
	Is the c	claim subject to offset?			Other. Opecity	
	✓ No					
	Yes					
8	BAPTI	ST MEDICAL CENTER			Last 4 digits of account number 0194	\$ <u>739.00</u>
	Nonpriori	ty Creditor's Name			When was the debt incurred?	
		OX 88087				
	Number	Street			As of the date you file, the claim is: Check all that apply.	
					— Check all that appry.	
	Chicag	90	IL	60680	Contingent	
	City	curred the debt? Check one.	State	ZIP Code	Unliquidated	
		tor 1 only			☐ Disputed	
	Debt	tor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ Debt	tor 1 and Debtor 2 only			☐ Student loans	
	At le	east one of the debtors and another			☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Che	ck if this claim is for a commun	nity debt		☐ Debts to pension or profit-sharing plans, and other similar debts	
			,		✓ Other. Specify	
	Is the c	laim subject to offset?				
	Yes					
.9		IOT MEDICAL OFNITED				
.0	BAPTI	IST MEDICAL CENTER			Last 4 digits of account number	\$12,128.00
	Nonpriori	ity Creditor's Name			When was the debt incurred?	
		3OX 2252				
	Number	Street			As of the date you file, the claim is: Check all that apply.	
	D:		A.I.	05040	<u> </u>	
	Birmin City	ynalli	AL State	35246 ZIP Code	Contingent	
	Who in	curred the debt? Check one.	3.0.0	5555	Unliquidated	
		tor 1 only			Disputed	
		tor 2 only			Type of NONPRIORITY unsecured claim:	
	_	tor 1 and Debtor 2 only			Student loans	
		east one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Che	eck if this claim is for a commur	nity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the c	claim subject to offset?			Other. Specify	
		-				

No Yes

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Debtor 1 GLENDA MORGAN

First Name Middle Name

Last Name

Pa	rt 2:	List All of Your NONPRIOR	ITY Uns	secured Claims		
	_	ny creditors have nonpriority unstance. You have nothing to report in this es				
	nonpi	riority unsecured claim, list the cred	itor separ itor holds	ately for each claim	order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no	list claims already
	1					Total claim
4.10]	PITAL ONE AUTO priority Creditor's Name			Last 4 digits of account number	s Unknown
	P.O. BOX 60511			When was the debt incurred?	<u> </u>	
	Number Street				•	
		0(1.1.1		01710	As of the date you file, the claim is: Check all that apply.	
	City	y Of Industry	CA State	91716 ZIP Code	☐ Contingent	
	Who	o incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
		Debtor 1 only			Type of NONPRIORITY unsecured claim:	
	_	Debtor 2 only Debtor 1 and Debtor 2 only			☐ Student loans	
	_	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts	
	ls th	ne claim subject to offset?	•		☑ Other. Specify	
	v					
4.11		Yes PITAL ONE AUTO FINANCE			Last 4 digits of account number	_{\$} Unknown
	J	priority Creditor's Name			When was the debt incurred?	Ψ
		D. BOX 201347				
	Num	ber Street			As of the date you file, the claim is: Check all that apply.	
	Δrli	ington	TX	76006	☐ Contingent	
	City		State	ZIP Code	Unliquidated	
		o incurred the debt? Check one. Debtor 1 only			☐ Disputed Type of NONPRIORITY unsecured claim:	
		Debtor 2 only			Student loans	
	_	Debtor 1 and Debtor 2 only At least one of the debtors and another			Obligations arising out of a separation agreement or divorce	
		Check if this claim is for a commun	itu daht		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	·		ity debt		✓ Other. Specify	
	15 ti	ne claim subject to offset? No				
		Yes				
4.12	CA	ASH JAR			Last 4 digits of account number	_{\$} Unknown
		priority Creditor's Name			When was the debt incurred?	
	Num	D. BOX 025250 hber Street				
					As of the date you file, the claim is: Check all that apply.	
	Mia City	ami	FL State	33102 ZIP Code	Contingent	
	Wh	o incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
		Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
		Debtor 1 and Debtor 2 only			Student loans	
		At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts	
		he claim subject to offset?			Other. Specify	
	V	NO				

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Debtor 1 GLENDA MORGAN

First Name Middle Name

Last Name

Case number (if known)_____

Pai	rt 2: List All of Your NONPRIOR	RITY Un	secured Claims		
3.	Do any creditors have nonpriority un	secured	claims against you	?	
	No. You have nothing to report in the				
i	nonpriority unsecured claim, list the cred	ditor sepa ditor holds	rately for each claim	order of the creditor who holds each claim. If a creditor has a reach claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no	list claims already
4.40	CASH NET USA				Total claim
4.13	Nonpriority Creditor's Name			Last 4 digits of account number	_{\$} Unknown
	175 W JACKSON BLVD			When was the debt incurred?	Ψ
	Number Street				
	STE 1000				
	Chicago	IL	60604	As of the date you file, the claim is: Check all that apply.	
	Chicago City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	Olalo	2 5555	Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	☐ At least one of the debtors and another			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a commun	nity dobt		Debts to pension or profit-sharing plans, and other similar debts	
		ility debt		✓ Other. Specify	
	Is the claim subject to offset?				
	Yes				
4.14				Last 4 digits of account number 3800	_{\$} 715.00
7.17				When was the debt incurred?	φ <u>. 1.0.00</u>
	Nonpriority Creditor's Name			When was the dest incurred:	
	P.O. BOX 60500 Number Street				
	Number Street			As of the date you file, the claim is: Check all that apply.	
	lackeen	MC	39205	☐ Contingent	
	Jackson City	MS State	ZIP Code	☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only			Type of NONPRIORITY unsecured claim:	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce	
				that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim is for a commun	nity debt		Debts to pension or profit-snaring plans, and other similar debts Other. Specify	
	Is the claim subject to offset?			- Other, opening	
	No				
4 4 5	Yes				
4.15	CREDIT ONE BANK			Last 4 digits of account number	_{\$} Unknown
	Nonpriority Creditor's Name			When was the debt incurred?	Ψ
	P.O. BOX 60500				
	Number Street			A 64 14 61 4 15 1 0 1 1 1 1 1	
				As of the date you file, the claim is: Check all that apply.	
	City Of Industry	CA State	91716 ZIP Code	Contingent	
	Who incurred the debt? Check one.	Sidile	ZIF COUR	Unliquidated	
	Debtor 1 only			Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a commun	nity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify	
	✓ No				

Yes

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Debtor 1 GLENDA MORGAN

First Name Middle Name

Last Name

Par	t 2: List All of Your NONPRIO	RITY Un	secured Claims			
	Do any creditors have nonpriority un No. You have nothing to report in the Yes					
i	nonpriority unsecured claim, list the cre	editor sepa editor holds	rately for each clair	order of the creditor who holds each claim. If a creditor has m. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no	t list claims already	
					Total claim	
4.16	EOS CCA			Look A divide of consumb annual con-		
	Nonpriority Creditor's Name			_ Last 4 digits of account number	_{\$} Unknown	
	P.O. BOX 806			When was the debt incurred?		
	Number Street					
	Acworth	NH	03601	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			☐ Disputed Type of NONPRIORITY unsecured claim:		
	Debtor 2 only			Student loans		
	Debtor 1 and Debtor 2 only			Obligations arising out of a separation agreement or divorce		
	At least one of the debtors and another	ſ		that you did not report as priority claims		
	☐ Check if this claim is for a commu	ınity debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify		
	Is the claim subject to offset?			E outer. openly		
	No					
4.17	Yes FIGIS				\$ 144.00	
4.17	. Idle			Last 4 digits of account number - When was the debt incurred?	\$ 144.00	
	Nonpriority Creditor's Name P.O. BOX 77001			- when was the debt incurred?		
	Number Street			As of the date you file, the claim is: Check all that apply.		
	Madison	WI	53707	Contingent		
	City Who incurred the debt? Check one.	State	ZIP Code	Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			☐ Student loans☐ Obligations arising out of a separation agreement or divorce		
	At least one of the debtors and another	•		that you did not report as priority claims		
	☐ Check if this claim is for a commu	ınity debt		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			✓ Other. Specify		
	☑ No					
4.40	Yes					
4.18	FIRST HERITAGE OF MISSISSIPP	II		Last 4 digits of account number	_{\$} Unknown	
	Nonpriority Creditor's Name			When was the debt incurred?	*	
	D/B/A 1ST HERITAGE CREDIT			_		
	Number Street 129 CENTER ST, STE C			As of the date you file, the claim is: Check all that apply.		
	Jackson	MS	39218	Contingent		
	City Who incurred the debt? Check one.	State	ZIP Code	Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			Student loans		
	At least one of the debtors and another			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	☐ Check if this claim is for a commu	ınity debt		Debts to pension or profit-sharing plans, and other similar debts	i	
	Is the claim subject to offset?			✓ Other. Specify		
	No					
	Yes					

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Debtor 1 GLENDA MORGAN

First Name Middle Name

Last Name

Pa	rt	2: List All of Your NONPRIOR	RITY Un	secured Claims		
		o any creditors have nonpriority un No. You have nothing to report in th Yes				
	no inc	onpriority unsecured claim, list the cre-	ditor sepa ditor holds	rately for each claim	order of the creditor who holds each claim. If a creditor has a reach claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no	list claims already
						Total claim
4.19	1 _	GFC LENDING LLC Nonpriority Creditor's Name			Last 4 digits of account number	\$ Unknown
	_	P.O. BOX 29018			When was the debt incurred?	
	N	Number Street				
	-	Phoenix	AZ	85038	As of the date you file, the claim is: Check all that apply.	
	c	City	State	ZIP Code	Contingent	
	-	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	_	Debtor 1 only			Type of NONPRIORITY unsecured claim:	
	F	Debtor 2 only Debtor 1 and Debtor 2 only			☐ Student loans	
	Ī	At least one of the debtors and another			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
		Check if this claim is for a commu	nity debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	_	s the claim subject to offset?			_ cassepsc,	
	[<u>'</u>	✓ No Yes				
4.20	J ,	GREEN TRUST CASH			Last 4 digits of account number	_{\$} Unknown
	J _	Name is site. One ditable Name			When was the debt incurred?	<u> </u>
		Nonpriority Creditor's Name P.O. BOX 619096				
	Ī	Number Street			As of the date you file, the claim is: Check all that apply.	
	-	Redstone	MT	59257	☐ Contingent	
		City	State	ZIP Code	Unliquidated	
	_	Who incurred the debt? Check one. Debtor 1 only			☐ Disputed	
	ŗ	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Ē	Debtor 1 and Debtor 2 only			Student loans	
		At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		Check if this claim is for a commu	nity debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
		s the claim subject to offset?			Curier. Specify	
		✓ No Yes				
4.21		HARBOR LOANS OF CLINTON, INC)		Last 4 digits of account number	_{\$} Unknown
	1	Nonpriority Creditor's Name			When was the debt incurred?	<u> </u>
	_	322 HIGHWAY 80 EAST				
		Number Street STE 8			As of the date you file, the claim is: Check all that apply.	
		Clinton	MS	39056	☐ Contingent	
		City Who incurred the debt? Check one.	State	ZIP Code	Unliquidated	
	_	Debtor 1 only			Disputed	
		Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	L	Debtor 1 and Debtor 2 only			Student loans	
	_	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing plans, and other similar debts	
	_	Is the claim subject to offset?			✓ Other. Specify	
		✓ No Yes				

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Debtor 1 GLENDA MORGAN

First Name Middle Name

Last Name

_____ Case number (if known)_

Pai	rt 2: List All of Your NONPRIOR	ITY Uns	secured Claims		
	Do any creditors have nonpriority uns No. You have nothing to report in this Yes				
	nonpriority unsecured claim, list the cred	itor separ itor holds	ately for each claim	rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no	list claims already
					Total claim
4.22				Last 4 digits of account number	s Unknown
	Nonpriority Creditor's Name 322 HWY 80 EAST			When was the debt incurred?	4
	Number Street				
	Clinton	MS	39056	As of the date you file, the claim is: Check all that apply.	
		State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only			Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another			that you did not report as priority claims	
	☐ Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify	
	✓ No				
	☐ Yes INFINITY				11.1
4.23	INFINIT			Last 4 digits of account number	\$ Unknown
	Nonpriority Creditor's Name P.O. BOX 2127			When was the debt incurred?	
	Number Street				
				As of the date you file, the claim is: Check all that apply.	
	Jackson	MS	39225	Contingent	
	City	State	ZIP Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only			Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify	
	✓ No				
	Yes				
1.24	K JORDAN			Last 4 digits of account number	_{\$} 149.00
	Nonpriority Creditor's Name			When was the debt incurred?	\$140.00
	P.O. BOX 2809				
	Number Street			As of the date you file, the claim is: Check all that apply.	
	Monroe	WI	53566	_	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only				
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another			☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
				that you did not report as priority claims	
	☐ Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			☑ Other. Specify	
	No				
	Yes				

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GLENDA MORGAN Debtor 1

Case number (if known)

5050	0	First Name	Middle Name	Last Name	e	Case Harriser (# Miowii)	
Par	t 2:	List All of Yo	ur NONPRIOF	RITY Un	secured Claims		
[_	No. You have nothir			claims against you?	court with your other schedules.	
r i	nonp	oriority unsecured c	laim, list the cred ore than one cred	ditor sepai ditor holds	rately for each claim.	rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not at the other creditors in Part 3.If you have more than three no	list claims already
							Total claim
.25		ARRY AUTO SALES	S 			Last 4 digits of account number	s Unknown
		npriority Creditor's Name 892 HWY 80 EAST				When was the debt incurred?	\$ <u>OTHEROWIT</u>
		mber Street					
						As of the date you file, the claim is: Check all that apply.	
		EARL		MS	39208	☐ Contingent	
	City		10 at 1	State	ZIP Code	☐ Unliquidated	
		no incurred the debt Debtor 1 only	Check one.			☐ Disputed	
		Debtor 2 only				Type of NONPRIORITY unsecured claim:	
		Debtor 1 and Debtor				☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	Ш	At least one of the de	btors and another			that you did not report as priority claims	
		Check if this claim	is for a commu	nity debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	~	the claim subject to] No] Yes	offset?			,	
.26	L۱	/NV FUNDING, LLC	C its sucessors a	and assign	IS	Last 4 digits of account number	_{\$} Unknown
	Nor	npriority Creditor's Name				When was the debt incurred?	
	of	MHC Receivables,	LLC Resurgent	Capital			
		mber Street O. Boxx 10587				As of the date you file, the claim is: Check all that apply.	
		reenville		SC	29603	Contingent	
	City		42 Ohaali aaa	State	ZIP Code	Unliquidated	
	_	Debtor 1 only	t? Check one.			Disputed Type of NONPRIORITY unsecured claim:	
	_	Debtor 2 only				Student loans	
	_	Debtor 1 and Debtor 2 At least one of the de	•			Obligations arising out of a separation agreement or divorce	
	_					that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
		Check if this claim		nity debt		✓ Other. Specify	
		the claim subject to No	offset?				
_		Yes					
.27	М	IASSEYS				Last 4 digits of account number	_{\$} 112.00
		npriority Creditor's Name				When was the debt incurred?	
		.O. BOX 2822					
						As of the date you file, the claim is: Check all that apply.	
	M City	lonroe		WI State	53566 ZIP Code	Contingent	
	Wi	ho incurred the deb	t? Check one.	Olale	Zii OOUG	☐ Unliquidated ☐ Disputed	
		Debtor 1 only Debtor 2 only				Type of NONPRIORITY unsecured claim:	
		Debtor 2 only Debtor 1 and Debtor 3	2 only			Student loans	
	_	At least one of the de	=			Obligations arising out of a separation agreement or divorce	
		Check if this claim	is for a commu	nity debt		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	ls t	the claim subject to	offset?			Other. Specify	
		No					

Yes

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Debtor 1 GLENDA MORGAN

First Name Middle Name

Last Name

Pa	List All of Your NONPRIO	RIIYUn	secured Claims		
	Do any creditors have nonpriority un No. You have nothing to report in the Yes		• •		
	nonpriority unsecured claim, list the cre	ditor sepa ditor holds	rately for each claim	order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three not	list claims already
					Total claim
4.00	MISSISSIPPI PHYSICIANS LLP				Total Claim
4.28				Last 4 digits of account number	_{\$} 1,931.00
	Nonpriority Creditor's Name				\$ 1,931.00
	P.O. BOX 731584			When was the debt incurred?	
	Number Street				
				As of the date you file, the claim is: Check all that apply.	
	Dallas	TX	75373	Contingent	
	City	State	ZIP Code	☐ Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only			Type of NONPRIORITY unsecured claim:	
	Debtor 2 only			Student loans	
	Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	-		✓ Other. Specify	
	✓ No				
	Yes				
4.29	NATIONAL CREDIT ADJUST			Last 4 digits of account number	_{\$} Unknown
				When was the debt incurred?	
	Nonpriority Creditor's Name P.O. BOX 3023				
	Number Street			As of the date you file, the claim is: Check all that apply.	
				Continued	
	Hutchinson	KS	67504	☐ Contingent☐ Unliquidated	
	City Who incurred the debt? Check one.	State	ZIP Code	☐ Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	☐ At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Charle if this plaim in face a commu			Debts to pension or profit-sharing plans, and other similar debts	
	☐ Check if this claim is for a commu	nity debt		✓ Other. Specify	
	Is the claim subject to offset?				
	∠ No				
	Yes				
4.30	Pioner Credit			Last 4 digits of account number	_{\$} Unknown
	Nonpriority Creditor's Name			When was the debt incurred?	\$ OTHER DATE
	P.O. Box 6206				
	Number Street				
				As of the date you file, the claim is: Check all that apply.	
	Jackson	MS	39288	Continued	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only				
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a commu	nity debt		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify	
	✓ No				
	Vos				

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Debtor 1 GLENDA MORGAN

First Name Middle Name

Last Name

Pa	rt 2	List All of Your NONPRIO	RITY Un	secured Claims		
		any creditors have nonpriority un No. You have nothing to report in the Yes		= -		
	non incl	priority unsecured claim, list the cre	editor sepa editor holds	rately for each claim	order of the creditor who holds each claim. If a creditor has a For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no	list claims already
						Total claim
4.31	Q	QUANTUM3 GROUP LLC AGENT F	OR		Last 4 digits of account number	
	No	onpriority Creditor's Name			-	_{\$} Unknown
		SANDINO FUNDING LLC			When was the debt incurred?	
		umber Street P.O. BOX 788				
			14/4		As of the date you file, the claim is: Check all that apply.	
	K Cit	(irkland	WA State	98083 ZIP Code	Contingent	
		/ho incurred the debt? Check one.	Otate	211 0000	Unliquidated	
		Debtor 1 only			Disputed	
		_			Type of NONPRIORITY unsecured claim: Student loans	
		Debtor 1 and Debtor 2 only			☐ Obligations arising out of a separation agreement or divorce	
	L	At least one of the debtors and another	r		that you did not report as priority claims	
	☐ Check if this claim is for a community debt				☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	ls	the claim subject to offset?			Other. Specify	
	=	No				
4.00	_	│ Yes RADIOLOGICAL GROUP				_{\$} 154.00
4.32	f ''	INDIOLOGIONE GITOOT			Last 4 digits of account number When was the debt incurred?	\$ 134.00
		onpriority Creditor's Name 107 HIGHLAND COLONY PKWY[when was the debt incurred?	
		umber Street				
		STE 209			As of the date you file, the claim is: Check all that apply.	
	R	Ridgeland	MS	39157	Contingent	
	Cit	ity /ho incurred the debt? Check one.	State	ZIP Code	☐ Unliquidated ☐ Disputed	
	_	Debtor 1 only			Type of NONPRIORITY unsecured claim:	
		Debtor 2 only			☐ Student loans	
	늗	Debtor 1 and Debtor 2 only At least one of the debtors and another			Obligations arising out of a separation agreement or divorce	
		_ _			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
		☐ Check if this claim is for a commu	unity debt		✓ Other. Specify	
		the claim subject to offset?			, ,	
	Ė	Yes				
4.33	F	REGIONS BANK			Last 4 digits of account number	
	_	onpriority Creditor's Name			When was the debt incurred?	\$Unknown
		P.O. BOX 10063				
	_	umber Street				
	_				As of the date you file, the claim is: Check all that apply.	
		Birmingham itv	AL State	35202 ZIP Code	Contingent	
	W	Vho incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
		Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
		Debtor 2 only Debtor 1 and Debtor 2 only			Student loans	
	Ē	At least one of the debtors and another	r		☐ Obligations arising out of a separation agreement or divorce	
		Check if this claim is for a commu	unity deht		that you did not report as priority claims	
		the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts☑ Other. Specify	
		No				
		Yes				

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Debtor 1 GLENDA MORGAN

First Name Middle Name

Last Name

Pa	rt 2:	List All of Your NONPRIOR	RITY Un	secured Claims		
3.	_	ny creditors have nonpriority un				
	☐ Ye	o. You have nothing to report in thi es	s part. Su	bmit this form to the	e court with your other schedules.	
	nonpri includ	iority unsecured claim, list the cred	ditor sepai litor holds	ately for each claim	order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no	list claims already
4 24	l _B ∩l	BERT M. PEEBLES, III				Total claim
4.34		riority Creditor's Name			Last 4 digits of account number	_{\$} Unknown
	US BAND ASSOCIATION			When was the debt incurred?		
	Number Street 340 EDGEWOOD TERRACE					
	Jacl	kson	MS	39206	As of the date you file, the claim is: Check all that apply.	
	City		State	ZIP Code	Contingent	
	Who	incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
		Debtor 1 only			Type of NONPRIORITY unsecured claim:	
		Debtor 2 only Debtor 1 and Debtor 2 only			Student loans	
		At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is th	ne claim subject to offset? No			Other. Specify	
	Y					
4.35	SEF	ASIDE PAYDAY LOANS			Last 4 digits of account number	\$ Unknown
		oriority Creditor's Name D. BOX 6048			When was the debt incurred?	
	Numb	ber Street			As of the date you file, the claim is: Check all that apply.	
	Pine	e Ridge	SD	57770	Contingent	
	City	o incurred the debt? Check one.	State	ZIP Code	☐ Unliquidated ☐ Disputed	
		Debtor 1 only			Type of NONPRIORITY unsecured claim:	
		Debtor 2 only			☐ Student loans	
	_	Debtor 1 and Debtor 2 only At least one of the debtors and another			Obligations arising out of a separation agreement or divorce	
		Check if this claim is for a commu	nity debt		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
		ne claim subject to offset?	nty debt		✓ Other. Specify	
	V	•				
		Yes				
4.36	SP	OT LOAN			Last 4 digits of account number	_{\$} Unknown
		oriority Creditor's Name			When was the debt incurred?	*
	P.C	D. BOX 927 ber Street				
	Nulli	bei Street			As of the date you file, the claim is: Check all that apply.	
		latine	IL	60078	Contingent	
	City Who	o incurred the debt? Check one.	State	ZIP Code	Unliquidated	
		Debtor 1 only			☐ Disputed Type of NONPRIORITY unsecured claim:	
		Debtor 2 only Debtor 1 and Debtor 2 only			Student loans	
		At least one of the debtors and another			☐ Obligations arising out of a separation agreement or divorce	
		Check if this claim is for a commu	nity debt		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
		ne claim subject to offset?	-		Other. Specify	
	V	No				

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GLENDA MORGAN Debtor 1

Case number (if known)

		First Name	Middle Name	Last Name	9	Case Harrison (Indiam)	
Pa	rt 2:	List All of Yo	ur NONPRIOF	RITY Uns	secured Claims		
3.	Do any	y creditors have	nonpriority uns	secured o	claims against you?		
	□ No ☑ Ye	o. You have nothines	ng to report in thi	s part. Su	bmit this form to the o	court with your other schedules.	
	nonprio include	ority unsecured c	laim, list the cred re than one cred	litor separ itor holds	rately for each claim.	der of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not t the other creditors in Part 3.If you have more than three no	list claims already
]		T.A.I				Total claim
1.37		DOMINIC HOSPI	I AL			Last 4 digits of account number	s Unknown
	•	iority Creditor's Name SRA AND ASSO	CIATES			When was the debt incurred?	ş <u></u>
	Numbe						
						As of the date you file, the claim is: Check all that apply.	
	Jack City	son		MS State	39204 ZIP Code	Contingent	
	,	incurred the debt	2 Charle and	Otate	211 0000	Unliquidated	
	_	ebtor 1 only	Creck one.			Disputed	
		ebtor 2 only				Type of NONPRIORITY unsecured claim:	
		ebtor 1 and Debtor	2 only			Student loans	
	☐ Af	t least one of the de	btors and another			☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	□с	heck if this claim	is for a commur	ity debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	Is the	e claim subject to	offset?			_ Culci. opesity	
	✓ N						
1 20	STO	es NEBERRY					\$ 341.00
1.38] 0.0	, ver en				Last 4 digits of account number	\$341.00
		iority Creditor's Name BOX 2820				When was the debt incurred?	
	Numbe	er Street				As of the date you file, the claim is: Check all that apply.	
	Mon	iroe		WI	53566	Contingent	
	City			State	ZIP Code	Unliquidated	
	_	incurred the deb	t? Check one.			Disputed	
		ebtor 1 only ebtor 2 only				Type of NONPRIORITY unsecured claim:	
	_	ebtor 1 and Debtor:	2 only			Student loans	
		t least one of the de	•			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Пс	heck if this claim	is for a commun	ity dobt		Debts to pension or profit-sharing plans, and other similar debts	
				iity debt		☑ Other. Specify	
	Is the	e claim subject to	offset?				
	Y						
1.39		JSTMARK NATIC	NAL BANK			Last 4 digits of account number	_{\$} Unknown
	Nonpr	riority Creditor's Name				When was the debt incurred?	Ψ
	P.O.	. BOX 1928					
	Numb	er Street				As of the date you file, the claim is: Check all that apply.	
	Bran	ndon		MS	39043	_	
	City			State	ZIP Code	☐ Contingent ☐ Unliquidated	
		incurred the deb	t? Check one.			Disputed	
		ebtor 1 only ebtor 2 only				Type of NONPRIORITY unsecured claim:	
		ebtor 1 and Debtor	2 only			Student loans	
		t least one of the de	=			☐ Obligations arising out of a separation agreement or divorce	
		heck if this claim	is for a same	itu dakt		that you did not report as priority claims	
	-	THECK II LINS CIAIM	is ioi a commur	nty debt		Debts to pension or profit-sharing plans, and other similar debts.	

✓ No Yes

Is the claim subject to offset?

✓ Other. Specify

 $\hfill \Box$ Debts to pension or profit-sharing plans, and other similar debts

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GLENDA MORGAN Debtor 1

Case number (if known)

	First Name Middle Name Last Name	е	· '	
Pa	t 2: List All of Your NONPRIORITY Uns	secured Claims		
	Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Sure Yes	• •		
	res es			
	nonpriority unsecured claim, list the creditor separ	rately for each claim.	rder of the creditor who holds each claim. If a creditor has. For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no	list claims already
				Total claim
4.40	US BANK NA		Last 4 digits of account number	
	Nonpriority Creditor's Name		•	_{\$} Unknown
	14841 DALLAS PARKWAY #300 Number Street		When was the debt incurred?	
	Number Street			
	Dallar	75054	As of the date you file, the claim is: Check all that apply.	
	Dallas TX City State	75254 ZIP Code	Contingent	
	Who incurred the debt? Check one.	2 0000	Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only		☐ Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another		that you did not report as priority claims	
	☐ Check if this claim is for a community debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	Is the claim subject to offset?		Guler. Openly	
	✓ No			
	Yes		Last A digita of account number	\$
			Last 4 digits of account number When was the debt incurred?	Ψ
	Nonpriority Creditor's Name			
	Number Street		As of the date you file, the claim is: Check all that apply.	
			☐ Contingent	
	City State	ZIP Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only		☐ Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other. Specify	
	No			
	Yes			
			Last 4 digits of account number	\$
	Nonpriority Creditor's Name		When was the debt incurred?	
	Number Street			
			As of the date you file, the claim is: Check all that apply.	
			☐ Contingent	
	City State Who incurred the debt? Check one.	ZIP Code	Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Student loans	
	_		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts Other Specify	
	Is the claim subject to offcet?		L L Umer Specify	

☐ No Yes 19-00553-NPO Dkt 5 Filed 02/13/19 Entered 02/13/19 13:55:41 Page 32 of 62

GLENDA MORGAN Debtor 1

Middle Name Last Name Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government		\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00_
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6g.	\$	0.00
		6h.	\$	0.00
		6i.	+ \$	16,413.00
		6j.		

Fill in this information to identify your case:						
Debtor	GLENDA MORGA					
	First Name	Middle Name	Last Name	_		
Debtor 2						
(Spouse If filing)	First Name	Middle Name	Last Name	_		
United States Bankruptcy Court for the Southern District of Mississippi						
Case number (If known)						

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you	have the contract or lease	State what the contract or lease is for
2.1			
	Name		-
	Street		
	City State	ZIP Code	-
2.2	N		_
	Name		
	Street		
	City State	ZIP Code	-
2.3	,		
	Name		-
	Street		
	City State	ZIP Code	-
2.4			
	Name		
	Street		
	City State	ZIP Code	-
2.5			
	Name		
	Street		
	City State	ZIP Code	-

Fill i	n this information to identify	y your case:			
Debte	or 1 GLENDA MORGAN				
Dakt	First Name	Middle Name	Last Name		
Debte (Spou	or 2 use, if filing) First Name	Middle Name	Last Name		
Unite	ed States Bankruptcy Court for the	Southern District of Mis-	sissippi		
	number		· · · · · · · · · · · · · · · · · · ·	,	<u>_</u>
(If kn	own)				Check if this is a amended filing
~ .c.					amended ming
Offi	cial Form 106H				
Scl	hedule H: You	r Codebtor	'S		12/15
are fill	ing together, both are equal	ly responsible for su tes on the left. Attach	pplying correct inforr	mation. If more	mplete and accurate as possible. If two married people space is needed, copy the Additional Page, fill it out, n the top of any Additional Pages, write your name and
	o you have any codebtors?	(If you are filing a join	t case, do not list eithe	r spouse as a co	odebtor.)
<u>•</u>	∃				
_ L	Yes Vithin the last 8 years have:	you lived in a comm	ınity property state o	r territory? (Cor	mmunity property states and territories include
	Arizona, California, Idaho, Lou	-		- '	
<u> </u>	No. Go to line 3.				
L	Yes. Did your spouse, form	er spouse, or legal eq	uivalent live with you a	at the time?	
	No	ituatata ar tarritaru did	vau liva?	⊏: II :•	n the name and current address of that person.
	Yes. In which communi	ty state or territory did	you live?	FIII II	n the name and current address of that person.
	Name of your spouse, former	spouse, or legal equivalent			
	Number Street				
	City	State	ZII	P Code	
s	shown in line 2 again as a co	odebtor only if that pe 6D), <i>Schedule E/F</i> (O	erson is a guarantor o	or cosigner. Mal	ur spouse is filing with you. List the person ke sure you have listed the creditor on (Official Form 106G). Use <i>Schedule D</i> ,
	Column 1: Your codebtor				Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3.1					Schedule D, line
	Name				Schedule E/F, line
	Street				Schedule G, line
	City	State		ZIP Code	
3.2	City	State		ZIF Code	
V	Name				Schedule D, line
					Schedule E/F, line
	Street				Schedule G, line
	City	State		ZIP Code	
3.3					Schedule D, line
	Name				Schedule E/F, line
	Street				Schedule G, line

Official Form 106H Schedule H: Your Codebtors page 1 of 1

ZIP Code

State

City

Fill in this information to identify your case:			
GLENDA MORGAN			
First Name Middle Name I	Last Name	_	
Debtor 2 (Spouse, if filing) First Name Middle Name I	Last Name		
United States Bankruptcy Court for the: _ Southern District of Mississi	ippi		
Case number(If known)	,	Check if t	his is:
, ,		_	nended filing
			plement showing postpetition chapter 13 e as of the following date:
Official Form 106I		MM / E	DD / YYYY
Schedule I: Your Income			12/15
Be as complete and accurate as possible. If two married peop supplying correct information. If you are married and not filin If you are separated and your spouse is not filing with you, do separate sheet to this form. On the top of any additional page. Part 1: Describe Employment	ig jointly, and your so not include inform	pouse is living with y ation about your spo	ou, include information about your spouse. use. If more space is needed, attach a
Fill in your employment	Debtor 1		Debtor 2 or non-filing spouse
information. If you have more than one job,	Debtor 1		Desico 2 of Hon-Hilling Spouse
attach a separate page with information about additional employers. Employment status	Employed Not employed		Employed Not employed
Include part-time, seasonal, or self-employed work.	nurse asst -par	t time	
Occupation may include student or homemaker, if it applies.	REGION 8 MENTAL HEALTH		
Employer's name			
Employer's address			
	Number Street		Number Street
	,		
	, MS City Sta	ate ZIP Code	City State ZIP Code
How long employed there	•	ate Zir Code	City State Zir Code
Part 2: Give Details About Monthly Income			
Estimate monthly income as of the date you file this form. spouse unless you are separated. If you or your non-filing spouse have more than one employer.	, combine the informa		
below. If you need more space, attach a separate sheet to this	s form.		
		For Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, salary, and commissions (before deductions). If not paid monthly, calculate what the monthly very salary.		s 1,151.00	\$
T. Control of the Con		Ψ	·
3. Estimate and list monthly overtime pay.	3.	+ \$0.00	+ \$

Official Form 106l Schedule I: Your Income page 1

Case number (if known)_

Debtor 1

GLENDA MORGAN

Middle Name

Last Name

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here	→ 4.	\$ 1,151.00	\$	
	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$36.87	\$	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$	
	5e. Insurance	5e.	\$0.00	\$	
	5f. Domestic support obligations	5f.	\$ 0.00 \$ 0.00	\$	
	5g. Union dues	5g.	Ψ	\$	
	5h. Other deductions. Specify:	5h.	Ť	+ \$	
			\$ \$	\$ \$	
			\$ \$	\$	
6	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$ 36.87	\$	
	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$s 1,114.13	\$ \$	
	outdute total monthly take nome pay. Outstract line of nom line 4.		Ψ	T	
8.	List all other income regularly received:				
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		s 0.00	•	
	monthly net income.	8a.	Ψ	\$	
	8b. Interest and dividends	8b.	\$0.00	\$	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	ent			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$	
	8d. Unemployment compensation	8d.	\$ 0.00	\$	
	8e. Social Security	8e.	\$ 888.00	\$	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$0.00	\$	
	8g. Pension or retirement income	8g.	\$ 0.00	\$	
	8h. Other monthly income. Specify:	8h.	+ \$ 0.00	+\$	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$ 888.00	\$	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	\$_2,002.13	+ \$	= \$_2,002.13
11.	State all other regular contributions to the expenses that you list in <i>Sche</i> Include contributions from an unmarried partner, members of your household, friends or relatives.	your o	lependents, your roc		
	Do not include any amounts already included in lines 2-10 or amounts that are				. 0.00
	Specify:				. + \$
12.	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain			•	\$2,002.13
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this No. Yes. Explain:	form	?		. ,

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GLENDA MORGAN

Debtor 1

First Name Middle Name Last Name

Case number (if known)_

Continuation Sheet for Official Form 106I

1. Describe Employment:

Debtor: GLENDA MORGAN

Occupation: nurse asst. part time

Name of Employer: PRIME CARE NURSING INC

Employer's Address: P.O. BOX 852, Greenville, MS 38702

Length of Employment:

Debtor: GLENDA MORGAN

Occupation: nurse asst

Name of Employer: Oxford/STATEWIDE HEALTHCARE SERVICES, LLC

Employer's Address: 1N STATE STREET 8TH FLOOR, Chicago, IL 60602

Length of Employment:

Official Form 106l Schedule I: Your Income

Fill	I in this information to identify	your case:			
Del	btor 1 GLENDA MORGAN		Check if this is		
Del	First Name	Middle Name Last Name			
	ouse, if filing) First Name	Middle Name Last Name	An amende	•	petition chapter 13
Uni	ited States Bankruptcy Court for the:	Southern District of Mississippi		is of the following	
	se number known)		MM / DD / Y	YYY	
Of	ficial Form 106J				
So	chedule J: Yo	ur Expenses			12/15
infoi (if ki					-
V	Yes. Does Debtor 2 live in a s	separate household? e Official Form 106J-2, <i>Expenses for</i> S	Separate Household of Debtor 2.		
2 D	o you have dependents?				
Do	o not list Debtor 1 and ebtor 2.	☐ No ☐ Yes. Fill out this information for each dependent		Dependent's age	Does dependent live with you?
	o not state the dependents' ames.		DAUGHTER (DISABLEI		No Yes
ex	o your expenses include kpenses of people other than purself and your dependents?	✓ No □ Yes			
Part	2. Estimate Your Ongo	ing Monthly Expenses			
expe appl	enses as of a date after the bar licable date.	r bankruptcy filing date unless you ankruptcy is filed. If this is a supplementable government assistance if you	ental <i>Schedule J</i> , check the box at		
		d it on Schedule I: Your Income (Offi		Your expe	nses
	The rental or home ownership of any rent for the ground or lot.	expenses for your residence. Include		\$	708.00
ı	f not included in line 4:				0.00
4	4a. Real estate taxes		•	4a. \$	0.00
4	4b. Property, homeowner's, or r	renter's insurance	•	4b. \$	0.00
4	4c. Home maintenance, repair,	and upkeep expenses		4c. \$	0.00

4d. Homeowner's association or condominium dues

0.00

4d.

Debtor 1

GLENDA MORGAN

First Name Middle Name Last Name

Case number (if known)_____

			Your expenses		
5.	Additional mortgage payments for your residence, such as home equity loans	5 .	\$	0.00	
6	Utilities:				
0.	6a. Electricity, heat, natural gas	6a.	\$	135.00	
	6b. Water, sewer, garbage collection	6b.	\$	65.00	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		110.00	
	6d. Other. Specify:	6d.		0.00	
7.	Food and housekeeping supplies	7.	\$	300.00	
8.	Childcare and children's education costs	8.	\$	0.00	
9.	Clothing, laundry, and dry cleaning	9.	\$	80.00	
10.	Personal care products and services	10.	\$	55.00	
11.	Medical and dental expenses	11.	\$	55.00	
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	300.00	
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	45.00	
14.	Charitable contributions and religious donations	14.	\$	0.00	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.				
	15a. Life insurance	15a.	\$	0.00	
	15b. Health insurance	15b.	\$	0.00	
	15c. Vehicle insurance	15c.	\$	145.00	
	15d. Other insurance. Specify:	15d.	\$	0.00	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00	
17.	Installment or lease payments:				
	17a. Car payments for Vehicle 1	17a.	\$	0.00	
	17b. Car payments for Vehicle 2	17b.	\$	0.00	
	17c. Other. Specify:	17c.	\$	0.00	
	17d. Other. Specify:	17d.	\$	0.00	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00	
19.	Other payments you make to support others who do not live with you.				
	Specify:	19.	\$	0.00	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.			
	20a. Mortgages on other property	20a.	\$	0.00	
	20b. Real estate taxes	20b.	\$	0.00	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00	
	20e. Homeowner's association or condominium dues	20e.	\$	0.00	

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ebtor 1	GLENDA MORGAN Case number (if knot)						wn)		
	First Name	Middle Name	Last Name						
Other. Sp	pecify:						21.	+\$	0.00
								+\$	
								+\$	
Calculate	e your mon	thly expenses.							
22a. Add I	lines 4 throu	gh 21.					22a.	\$	1,998.00
22b. Copy	y line 22 (mo	nthly expenses	for Debtor 2), if	any, from Official F	orm 106J-2 22c. Ad	ld line 22a	22b.	\$	
and 22b. T	The result is	your monthly e	xpenses.				22c.	\$	1,998.00
Calculate v	vour month	ly net income.							
•	-	-	onthly income) fr	rom Schedule I.			23a.	\$	2,002.13
			om line 22c abov				23b.	-\$	1,998.00
23c. Subt	tract your m	onthly expenses	from your mon	thly income.					4.13
The	result is you	r monthly net in	come.				23c.	\$	
. Do you ex	pect an inc	rease or decre	ase in your exr	penses within the	year after you file t	his form?			
					ear or do you expect				
•	•			•	the terms of your mo	•			
✓ No.									
☐ Yes.	Explain he	ere:							

Fill in this information to identify your case:										
Debtor 1	GLENDA MO	ORGAN Middle Name	Last Name							
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name							
	United States Bankruptcy Court for the Southern District of Mississippi									
Case number (If known)										

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	Γ an attorney to help you fill out bankruptcy forms?
✓ No ☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read that they are true and correct.	d the summary and schedules filed with this declaration and
✗ /s/ GLENDA MORGAN	×
Signature of Debtor 1	Signature of Debtor 2
Date 02/13/2019 MM / DD / YYYY	Date

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

□м	is your current marital sta farried lot married	tus?			
₽ N	ng the last 3 years, have yo lo les. List all of the places you	-			
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
	Number Street		From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To
	City	State ZIP Code		City State ZIP Code	
	Number Street		From To	Same as Debtor 1 Number Street	Same as Debtor 1 From To
	City	State ZIP Code		City State ZIP Cod	e
and t ☑ N	<i>erritories</i> include Arizona, Ca	alifornia, Idaho, Loui	siana, Nevada, Nev	alent in a community property state or territor with Mexico, Puerto Rico, Texas, Washington, and North 106H).	ry? (Community property states Wisconsin.)

Debtor 1	GLENDA MORGAI			Case	number (if known)	
	First Name Middle Na					
Part	2: Explain the Sourc	es of Your Inc	ome			
Fill If y	d you have any income fr I in the total amount of inco you are filing a joint case and	ome you received	from all jobs and all bu	usinesses, including part-		ndar years?
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)		(before deductions and exclusions)
	From January 1 of current the date you filed for b		Wages, commission bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
			☐ Operating a busine	SS	☐ Operating a business	
	For last calendar year:		Wages, commission bonuses, tips	ns, \$	Wages, commissions, bonuses, tips	\$
	(January 1 to December	31,)	☐ Operating a busine	SS	☐ Operating a business	
	For the calendar year b	pefore that:	Wages, commission bonuses, tips	ns,	Wages, commissions, bonuses, tips	•
	(January 1 to December	31,)	Operating a busine	ss [⊅]	 Operating a business 	Φ
	st each source and the gros No Yes, Fill in the details.	ss income from ea	ach source separately.	Do not include income the	nat you listed in line 4.	
_	res. I ili ili tile details.	Debtor 1			Debtor 2	
		Sources Describe	below. each (befo	s income from source re deductions and sions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
			¢.			œ.
From vear u	January 1 of current ntil the date you					\$ \$
	or bankruptcy:					\$
			<u> </u>			¥
For las	t calendar year:		\$			\$
(Januar	ry 1 to					
Deceml	ber 31,)		\$			\$
_						
	e calendar year					
before					-	
(Januai	ry 1 to ber 31,)		\$		-	\$
Deceill	DCI 31,					

Debtor 1 GLENDA MORGAN

GLLINDA IVIC	JIIGAIN		Case nur	Imber (if known)
First Name	Middle Name	Last Name		

art 3:	List	Certain Paym	ents You	Made Before	e You Filed	for Bankruptcy		
Are e	ither De	ebtor 1's or Deb	tor 2's debt	ts primarily co	onsumer debt	ts?		
☐ N						ebts. Consumer debts an	e defined in 11 U.S.C. § 101	(8) as
	Dur	ing the 90 days b	efore you fil	led for bankrup	otcy, did you p	ay any creditor a total of	\$6,425* or more?	
		No. Go to line 7.						
		the total amoun	nt you paid th	nat creditor. Do	not include p	\$6,425* or more in one ayments for domestic sunents to an attorney for t	ipport obligations, such as	
	* Sı			•		· · · · · · · · · · · · · · · · · · ·	after the date of adjustment.	
ଢା∨	as Dah	otor 1 or Debtor	2 or both h	avo primarily (consumar da	hte		
						ay any creditor a total of	\$600 or more?	
			ciole you iii	ica for barikrap	noy, ala you pi	ay arry creation a total of	quod of more:	
	٧	No. Go to line 7.						
		creditor. Do	not include	payments for o	domestic supp	\$600 or more and the to port obligations, such as ey for this bankruptcy cas		
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
						\$	\$	☐ Mortgage
		Creditor's Name				Ψ		☐ Car
								☐ Credit card
		Number Street						Loan repayment
								Suppliers or vendors
								Other
		City	State	ZIP Code				
						\$	\$	☐ Mortgage
		Creditor's Name						☐ Car
								☐ Credit card
		Number Street						Loan repayment
								☐ Suppliers or vendors
								Other
		City	State	ZIP Code				
						\$	\$	
		Creditor's Name				Ψ	φ	☐ Mortgage
								Car
		Number Street						Credit card
								Loan repayment
								Suppliers or vendors
								_
		City	State	ZIP Code				Other

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Case number (if known)

GLENDA MORGAN

Last Name

Debtor 1

Insia corpo agen		ny genera n officer, d ess you op	al partners; rel irector, persor	atives of any g n in control, or	eneral partners; pa	artnerships of which nore of their voting	
⊔ Y	es. List all payments to an	insider.		Dates of	Total amount	Amount you still	Reason for this payment
				payment	paid	owe	
	Insider's Name				\$	\$	
	Number Office of						
	Number Street						
	City	State	ZIP Code				
					\$	\$	
	Insider's Name						
	Number Street						
	City	State	ZIP Code				
an in Inclu	nsider? de payments on debts guar	anteed or	cosigned by a	an insider.			account of a debt that benefited
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
					\$	\$	
	Insider's Name						
	Number Street						
	City	State	ZIP Code				
					•	•	
	Insider's Name				\$	_ \$	
	Number Street						
	City	State	ZIP Code				

GLENDA	MORGAN		Case number (if	f known)	
First Name	Middle Name	Last Name			

Within 1 year before you filed for List all such matters, including pers and contract disputes.					_
▽ No					
Yes. Fill in the details.					
	Natur	re of the case	Court or agency		Status of the case
ase title:					
			Court Name		—
					On appeal
			Number Street		Concluded
ase number			City	State ZIP Code	
ase title:			Court Name		Pending
					On appeal
			Number Street		Concluded
			City	State ZIP Code	
ase number			Oity	State ZIF Code	
☑ No. Go to line 11. ☐ Yes. Fill in the information below	etails below. v.				
		Describe the proper	rty	Date	Value of the property
		Describe the proper	rty	Date	Value of the property
Yes. Fill in the information below		-		Date	Value of the property \$
Yes. Fill in the information below		Explain what happe	ned	Date	Value of the property \$
Yes. Fill in the information below		Explain what happe	ned repossessed.	Date	Value of the property \$\$
Yes. Fill in the information below		Explain what happe	ned repossessed. foreclosed.	Date	Value of the property \$
Yes. Fill in the information below		Explain what happe Property was Property was Property was	ned repossessed. foreclosed.		Value of the property \$
Yes. Fill in the information below Creditor's Name Number Street	N.	Explain what happe Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied		\$
Yes. Fill in the information below Creditor's Name Number Street	N.	Explain what happe Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied		\$Value of the property
Yes. Fill in the information below Creditor's Name Number Street	N.	Explain what happe Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied		\$
Yes. Fill in the information below Creditor's Name Number Street City 5	N.	Explain what happe Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied		\$Value of the property
Yes. Fill in the information below Creditor's Name Number Street City 5	N.	Explain what happe Property was Property was Property was Property was	ned repossessed. foreclosed. garnished. attached, seized, or levied		\$Value of the property
Yes. Fill in the information below Creditor's Name Number Street City S Creditor's Name	N.	Explain what happe Property was Property was Property was Property was Describe the proper	ned repossessed. foreclosed. garnished. attached, seized, or levied		\$Value of the property
Teditor's Name Creditor's Name City Creditor's Name	N.	Explain what happe Property was Property was Property was Property was Property was Explain what happe Explain what happe	ned repossessed. foreclosed. garnished. attached, seized, or levied rty ned		\$Value of the property
Creditor's Name Number Street City S Creditor's Name	N.	Explain what happe Property was Property was Property was Property was Describe the proper	ned repossessed. foreclosed. garnished. attached, seized, or levied rty ned repossessed. foreclosed.		\$Value of the property

Case number (if known)_

GLENDA MORGAN

First Name Middle Name

Last Name

No	use you owed a debt?		
110	•		
Yes. Fill in the details.			
	Describe the action the creditor took	Date action	Amount
		was taken	
Creditor's Name			
			\$
Number Street			
City State ZIP Code	Last 4 digits of account number: XXXX-		
thin 2 years before you filed for bankruptc No Yes. Fill in the details for each gift.	ons y, did you give any gifts with a total value of more than \$6	00 per person?	
res. Fill in the details for each gift.			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
			_
Person to Whom You Gave the Gift			\$
			\$
			\$
Number Street			\$
Number Street			\$
Number Street City State ZIP Code			\$
City State ZIP Code			\$
			\$
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	Dates you gave	\$Value
City State ZIP Code Person's relationship to you	Describe the gifts	Dates you gave the gifts	\$Value
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts	
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600	Describe the gifts	Dates you gave the gifts	\$Value
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts	\$
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	\$
City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts	Dates you gave the gifts	\$

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Case number (if known)

GLENDA MORGAN

	iptcy, did you give any gifts or contributions with a total value		to any chanty:
☑ No ☑ Yes. Fill in the details for each gift or co	ntribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name	-		\$
	-		\$
Number Street	-		
City State ZIP Code	_		
_			
6: List Certain Losses			
r gambling? No Yes. Fill in the details.			
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i>	Date of your loss	Value of property lost
			\$
7: List Certain Payments or Tra	nsfers		
fithin 1 year before you filed for bankruponsulted about seeking bankruptcy or publiclude any attorneys, bankruptcy petition p	ptcy, did you or anyone else acting on your behalf pay or trans		o anyone you
fithin 1 year before you filed for bankruponsulted about seeking bankruptcy or particulate any attorneys, bankruptcy petition particulate.	otcy, did you or anyone else acting on your behalf pay or trans preparing a bankruptcy petition?		
Jithin 1 year before you filed for bankruponsulted about seeking bankruptcy or particulate any attorneys, bankruptcy petition particulate.	ptcy, did you or anyone else acting on your behalf pay or trans preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in you	ur bankruptcy. Date payment or	Amount of paymen
Jithin 1 year before you filed for bankruptonsulted about seeking bankruptcy or particulate any attorneys, bankruptcy petition particulate No. Yes. Fill in the details.	ptcy, did you or anyone else acting on your behalf pay or trans preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in you	ur bankruptcy. Date payment or	
Ithin 1 year before you filed for bankrup on sulted about seeking bankruptcy or particulate any attorneys, bankruptcy petition particulate any attorneys. Person Who Was Paid	ptcy, did you or anyone else acting on your behalf pay or trans preparing a bankruptcy petition? preparers, or credit counseling agencies for services required in you	ur bankruptcy. Date payment or	

Case number (if known)_

GLENDA MORGAN

Debtor 1

Last Name Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street City State ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☐ Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ✓ No ☐ Yes. Fill in the details. Describe any property or payments received Description and value of property Date transfer or debts paid in exchange transferred was made Person Who Received Transfer Number Street ZIP Code State Person's relationship to you _ Person Who Received Transfer Number Street State ZIP Code Person's relationship to you ___

Case number (if known)

GLENDA MORGAN

Name of trust Name of trust	
Yes. Fill in the details. Description and value of the property transferred Daw wa	1
Name of trust Description and value of the property transferred Name of trust	
Name of trust List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units	ite transfer
Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No	is made
Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Last 4 digits of account number Type of account or instrument closed, sold, moved, or transferred XXXX	
Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Last 4 digits of account number Type of account or instrument Type of account or instrument Checking Savings Money market Brokerage Other Name of Financial Institution Number Street Name of Financial Institution Number Street Number S	
Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Last 4 digits of account number Type of account or instrument Type of account or instrument Checking Savings Money market Brokerage Other Number Street Number St	
closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Last 4 digits of account number Type of account or instrument Type of account or instrument Checking Savings Money market Brokerage Other XXXX	
brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No	
Yes. Fill in the details. Last 4 digits of account number	
Name of Financial Institution Number Street City State ZIP Code XXXXChecking Savings Money market Brokerage Other Checking \$	
Number Street Number Street Savings Money market Brokerage Other_	palance before ng or transfer
Number Street Number Street	
Number Street Money market	
City State ZIP Code XXXXChecking Savings Savings Money market Brokerage Other City State ZIP Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?	
Name of Financial Institution Number Street City State ZIP Code XXXXChecking Savings Money market Brokerage Other Other Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?	
Name of Financial Institution Savings Money market Brokerage Other City State ZIP Code	
Brokerage Other Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?	
City State ZIP Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?	
Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?	
securities, cash, or other valuables?	
✓ No	
Yes. Fill in the details.	
Who else had access to it? Describe the contents	Do you still have it?
Name of Financial Institution Name	☐ No☐ Yes
Number Street Number Street	
City State ZIP Code	

No			
Yes. Fill in the details.			
	Who else has or had access to it?	Describe the contents	Do you st have it?
			nave it?
Name of Storage Facility	Name		∐No □vaa
Name of Storage radiity	Nume		L∐Yes
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Co	ode		
or hold in trust for someone.	hat someone else owns? Include any proper	ty you borrowed from, are storing fo	or,
Yes. Fill in the details.	When is the ground O	Describe the assessed	Value
	Where is the property?	Describe the property	Value
Owner's Name	<u> </u>		\$
			Ψ
Number Street	Number Street		
Number Street			
- Street			
	City State ZIP Code	3	
City State ZIP Co	de	3	
	de	<u> </u>	
City State ZIP Co	ironmental Information) — — — — — — — — — — — — — — — — — — —	
City State ZIP Co t 10: Give Details About Envi the purpose of Part 10, the following Environmental law means any federal	ironmental Information definitions apply: I, state, or local statute or regulation concer	ning pollution, contamination, releas	
City State ZIP Co t 10: Give Details About Envi the purpose of Part 10, the following Environmental law means any federal azardous or toxic substances, waste	ironmental Information definitions apply:	ning pollution, contamination, release water, groundwater, or other medic	
City State ZIP Co	ironmental Information definitions apply: I, state, or local statute or regulation concer es, or material into the air, land, soil, surface	ning pollution, contamination, release water, groundwater, or other medic estes, or material.	um,
City State ZIP Co	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was roperty as defined under any environmental	ning pollution, contamination, release water, groundwater, or other medic estes, or material.	um,
City State ZIP Control of the purpose of Part 10, the following Environmental law means any federal mazardous or toxic substances, waste including statutes or regulations control of the means any location, facility, or professor of the means any location of the means anything at the means anything a	ironmental Information definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was reperty as defined under any environmentals, including disposal sites. an environmental law defines as a hazardour	ning pollution, contamination, release water, groundwater, or other medi astes, or material. law, whether you now own, operate	um, , or utilize
City State ZIP Co t 10: Give Details About Environmental law means any federal azardous or toxic substances, waste including statutes or regulations conficte means any location, facility, or pr it or used to own, operate, or utilize it dazardous material means anything a substance, hazardous material, pollutions	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was roperty as defined under any environmental including disposal sites. In environmental law defines as a hazardoustant, contaminant, or similar term.	ning pollution, contamination, release water, groundwater, or other medit estes, or material. law, whether you now own, operate s waste, hazardous substance, toxid	um, , or utilize
City State ZIP Co t 10: Give Details About Environmental law means any federal azardous or toxic substances, waste including statutes or regulations conficte means any location, facility, or pr it or used to own, operate, or utilize it dazardous material means anything a substance, hazardous material, pollutions	ironmental Information definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was reperty as defined under any environmentals, including disposal sites. an environmental law defines as a hazardour	ning pollution, contamination, release water, groundwater, or other medit estes, or material. law, whether you now own, operate s waste, hazardous substance, toxid	um, , or utilize
City State ZIP Co t 10: Give Details About Environmental law means any federal azardous or toxic substances, waste including statutes or regulations conficte means any location, facility, or pr it or used to own, operate, or utilize it dazardous material means anything a substance, hazardous material, pollution ort all notices, releases, and proceed	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was roperty as defined under any environmental including disposal sites. In environmental law defines as a hazardoustant, contaminant, or similar term.	ning pollution, contamination, release water, groundwater, or other medicates, or material. law, whether you now own, operate as waste, hazardous substance, toxicaten they occurred.	um, , or utilize
City State ZIP Co	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was reperty as defined under any environmentals, including disposal sites. In environmental law defines as a hazardoustant, contaminant, or similar term. Idings that you know about, regardless of what is the similar term.	ning pollution, contamination, release water, groundwater, or other medicates, or material. law, whether you now own, operate as waste, hazardous substance, toxicaten they occurred.	um, , or utilize
City State ZIP Control of the purpose of Part 10, the following Environmental law means any federal mazardous or toxic substances, waste including statutes or regulations control of the means any location, facility, or professor of the means any location of the means any location, facility, or professor of the means any location of the means an	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was reperty as defined under any environmentals, including disposal sites. In environmental law defines as a hazardoustant, contaminant, or similar term. Idings that you know about, regardless of what is the similar term.	ning pollution, contamination, release water, groundwater, or other medicates, or material. law, whether you now own, operate as waste, hazardous substance, toxicaten they occurred.	um, , or utilize
City State ZIP Co	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was reperty as defined under any environmentals, including disposal sites. In environmental law defines as a hazardoustant, contaminant, or similar term. Idings that you know about, regardless of whom that you may be liable or potentially liable	ning pollution, contamination, release water, groundwater, or other medicates, or material. law, whether you now own, operate as waste, hazardous substance, toxicaten they occurred. under or in violation of an environm	um, , or utilize : nental law?
City State ZIP Control of the purpose of Part 10, the following Environmental law means any federal mazardous or toxic substances, waste including statutes or regulations control of the means any location, facility, or professor of the means any location of the means any location, facility, or professor of the means any location of the means an	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was reperty as defined under any environmentals, including disposal sites. In environmental law defines as a hazardoustant, contaminant, or similar term. Idings that you know about, regardless of whom that you may be liable or potentially liable	ning pollution, contamination, release water, groundwater, or other medicates, or material. law, whether you now own, operate as waste, hazardous substance, toxicaten they occurred.	um, , or utilize
City State ZIP Control of the purpose of Part 10, the following Environmental law means any federal mazardous or toxic substances, waste including statutes or regulations control of the means any location, facility, or professor of the means any location of the means any location, facility, or professor of the means any location of the means an	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was reperty as defined under any environmentals, including disposal sites. In environmental law defines as a hazardoustant, contaminant, or similar term. Idings that you know about, regardless of whom that you may be liable or potentially liable	ning pollution, contamination, release water, groundwater, or other medicates, or material. law, whether you now own, operate as waste, hazardous substance, toxicaten they occurred. under or in violation of an environm	um, , or utilize : nental law?
City State ZIP Control of the purpose of Part 10, the following Environmental law means any federal mazardous or toxic substances, waste including statutes or regulations control of the means any location, facility, or professor of the means any location of the means any location, facility, or professor of the means any location of the means an	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was reperty as defined under any environmentals, including disposal sites. In environmental law defines as a hazardoustant, contaminant, or similar term. Idings that you know about, regardless of whom that you may be liable or potentially liable	ning pollution, contamination, release water, groundwater, or other medicates, or material. law, whether you now own, operate as waste, hazardous substance, toxicaten they occurred. under or in violation of an environm	um, , or utilize : nental law?
City State ZIP Co	definitions apply: I, state, or local statute or regulation conceres, or material into the air, land, soil, surface trolling the cleanup of these substances, was reperty as defined under any environmentals, including disposal sites. In environmental law defines as a hazardoustant, contaminant, or similar term. Idings that you know about, regardless of whom the power is the power in the power is the contaminant of the power is the contaminant of the contaminant of the contaminant is the contaminant of t	ning pollution, contamination, release water, groundwater, or other medicates, or material. law, whether you now own, operate as waste, hazardous substance, toxicaten they occurred. under or in violation of an environm	um, , or utilize : nental law?

GLENDA MORGAN

GLENDA MORGAN

Debtor 1 Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? ✓ No ☐ Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Governmental unit Name of site Number Street Number Street City State ZIP Code City State ZIP Code 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ✓ No Yes. Fill in the details. Status of the Court or agency Nature of the case case Case title Pending Court Name On appeal Number Street ☐ Concluded Case number State ZIP Code Give Details About Your Business or Connections to Any Business Part 11: 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Business Name Number Street Dates business existed Name of accountant or bookkeeper To _ ZIP Code **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN. **Business Name** Number Street Dates business existed Name of accountant or bookkeeper From To _____

City

State

ZIP Code

GLENDA MORGAN

	Last Name	
	Describe the nature of the business	Employer Identification number
		Do not include Social Security number or ITIN
Business Name		EIN: -
		EIN
Number Street		Dates business existed
	Name of accountant or bookkeeper	From To
City State ZIP	Code	
thin 2 years before you filed for b		o anyone about your business? Include all financial
l No		
Yes. Fill in the details below.		
	Date issued	
	Date Issueu	
Name	MM / DD / YYYY	
Number Street		
		
City State ZIP	Code	
_		
12: Sign Below		
have read the answers on this <i>St</i>	atement of Financial Affairs and any attachmen	nts, and I declare under penalty of perjury that the
have read the answers on this <i>St</i> answers are true and correct. I undoes not the connection with a bankruptcy ca	derstand that making a false statement, conceases can result in fines up to \$250,000, or impris	aling property, or obtaining money or property by fraud
have read the answers on this <i>St</i> answers are true and correct. I und	derstand that making a false statement, conceases can result in fines up to \$250,000, or impris	aling property, or obtaining money or property by fraud
have read the answers on this <i>St</i> answers are true and correct. I undoes not the connection with a bankruptcy ca	derstand that making a false statement, conceases can result in fines up to \$250,000, or impris	aling property, or obtaining money or property by fraud
have read the answers on this <i>Sta</i> nswers are true and correct. I und n connection with a bankruptcy ca 8 U.S.C. §§ 152, 1341, 1519, and 3	derstand that making a false statement, conceases can result in fines up to \$250,000, or impris	aling property, or obtaining money or property by fraud
have read the answers on this <i>Sta</i> nswers are true and correct. I und n connection with a bankruptcy ca 8 U.S.C. §§ 152, 1341, 1519, and 3	derstand that making a false statement, concease can result in fines up to \$250,000, or impris	aling property, or obtaining money or property by fraud
have read the answers on this <i>Sta</i> nswers are true and correct. I und a connection with a bankruptcy ca 8 U.S.C. §§ 152, 1341, 1519, and 3	derstand that making a false statement, concerase can result in fines up to \$250,000, or imprise 3571.	aling property, or obtaining money or property by fraud
have read the answers on this <i>Sta</i> nswers are true and correct. I und a connection with a bankruptcy ca 8 U.S.C. §§ 152, 1341, 1519, and 3	derstand that making a false statement, concerase can result in fines up to \$250,000, or imprise 3571.	aling property, or obtaining money or property by fraud
have read the answers on this Stanswers are true and correct. I und a connection with a bankruptcy of 8 U.S.C. §§ 152, 1341, 1519, and 3 //s/ GLENDA MORGAN Signature of Debtor 1 Date 02/13/2019	derstand that making a false statement, concertase can result in fines up to \$250,000, or imprison. Signature of Debtor 2	aling property, or obtaining money or property by fraud
have read the answers on this Stanswers are true and correct. I under connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3 /s/ GLENDA MORGAN Signature of Debtor 1 Date 02/13/2019 Did you attach additional pages to	derstand that making a false statement, concertase can result in fines up to \$250,000, or imprison. Signature of Debtor 2	aling property, or obtaining money or property by frauc sonment for up to 20 years, or both.
have read the answers on this Stanswers are true and correct. I under connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3 /s/ GLENDA MORGAN Signature of Debtor 1 Date 02/13/2019 Did you attach additional pages to	derstand that making a false statement, concertase can result in fines up to \$250,000, or imprison. Signature of Debtor 2	aling property, or obtaining money or property by frauc sonment for up to 20 years, or both.
have read the answers on this Stanswers are true and correct. I under connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3 /s/ GLENDA MORGAN Signature of Debtor 1 Date 02/13/2019 Did you attach additional pages to	derstand that making a false statement, concertase can result in fines up to \$250,000, or imprison. Signature of Debtor 2	aling property, or obtaining money or property by frauc sonment for up to 20 years, or both.
have read the answers on this Stanswers are true and correct. I und a connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3 /s/ GLENDA MORGAN Signature of Debtor 1 Date 02/13/2019 Did you attach additional pages to Yes	derstand that making a false statement, concerse can result in fines up to \$250,000, or imprises a second result in fines up to \$250,000,	aling property, or obtaining money or property by fraudsonment for up to 20 years, or both.
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Fill in this in	formation to ide	entify your case:		
Debtor 1	GLENDA MORGA	AN		
 	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court f	or the Southern District of Mississip	oi	
Case number				
(If known)			_	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's MR COOPER	☐ Surrender the property.	✓ No
	Retain the property and redeem it.	_ Yes
Description of 5943 WAVERLY DRIVE property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
occurring debt.	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	☐ Retain the property and enter into a Reaffirmation Agreement.	
55501.1.1g	Retain the property and [explain]:	

GLENDA MORGAN Debtor Case number (If known)_

ed. You may assume an unexpired personal property lease if the trustee does no	ot assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□No
Description of leased roperty:	Yes
essor's name:	□No
Description of leased roperty:	∟ Yes
essor's name:	□No
Description of leased roperty:	Yes
essor's name:	□ No □ Yes
Description of leased roperty:	Les
essor's name:	□No
Description of leased roperty:	LYes
essor's name:	□ No
Description of leased roperty:	∟ Yes
essor's name:	□ No
Description of leased roperty:	☐Yes

K /s/ GLENDA MORGAN	×
Signature of Debtor 1	Signature of Debtor 2
Date 02/13/2019 MM / DD / YYYY	Date

19-00553-NPO Dkt 5 Filed 02/13/19 Entered 02/13/19 13:55:41 Page 56 of 62 B2030 (Form 2030) (12/15)

United States Bankruptcy Court

Southern District of Mississippi

Ir	In re GLENDA MORGAN	
		Case No
Do	Debtor	Chapter_ ⁷
	DISCLOSURE OF COMPENSATION OF ATTORNE	Y FOR DEBTOR
1.	1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify above named debtor(s) and that compensation paid to me within one petition in bankruptcy, or agreed to be paid to me, for services render the debtor(s) in contemplation of or in connection with the bankruptcy.	year before the filing of the red or to be rendered on behalf of
✓] <u>F</u> I	FLAT FEE	
	For legal services, I have agreed to accept	\$_605.00
	Prior to the filing of this statement I have received	\$_605.00
	Balance Due	
R	<u>retainer</u>	
_	For legal services, I have agreed to accept a retainer of	\$
	The undersigned shall bill against the retainer at an hourly rate of [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay a approved fees and expenses exceeding the amount of the retainer.	
2.	2. The source of the compensation paid to me was: Other (specify)	
3.	3. The source of compensation to be paid to me is: Debtor Other (specify)	
4.	4. I have not agreed to share the above-disclosed compensation w are members and associates of my law firm.	ith any other person unless they
	I have agreed to share the above-disclosed compensation with a are not members or associates of my law firm. A copy of the Agreement, of the people sharing the compensation is attached.	
5.	In return of the above-disclosed fee, I have agreed to render legal serve bankruptcy case, including:	vice for all aspects of the

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

d. [Other provisions as needed] Ch 7 Bankruptcy

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: ADVERSARY MATTERS.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

02/13/2019

/s/ TK Byrne, 9801

Date

Signature of Attorney

TK Byrne Law Firm

Name of law firm PO Box 181 Ste # M Clinton, MS 39060 tkbyrnelaw@gmail.com

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
•	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.